Public Health Information for Community Partners

EPIsodes

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On the Horizon

It has a challenging name and we haven't really seen it in the US yet (only occasionally in people returning from abroad). When it does arrive, it has the ability to set up permanent residence right here on the Treasure Coast and other parts of Florida. What's more, it's getting closer.

We're talking about yet another mosquito-borne disease that has affected hundreds of thousands of people since it was first isolated in 1953 (Tanzania)- chikungunya fever. Chikungunya has been blamed for many epidemics throughout Africa, Asia, in some areas of Europe, and now the Caribbean.

Pronounced *chik-en-**gun**-ye*, this virus has caused mostly non-fatal though miserable epidemics of fever illnesses.

Symptoms of chikungunya often include:

- Sudden onset of high fever (>102° F)
- **Severe** joint pain especially in hands and feet (usually same joints on both sides)
- Headache
- Myalgias (muscle pains)
- Back pain
- Rash (starts about 2-5 days after fever)

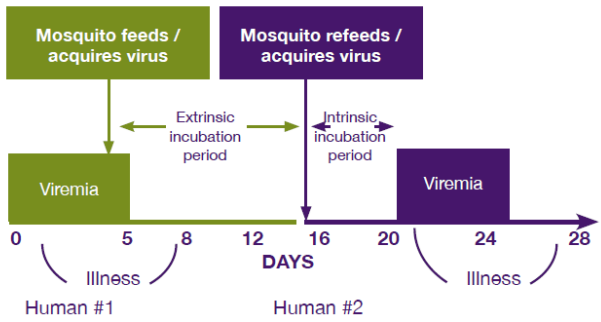
People usually recover after about a week to ten days but can go on to have chronic or long term joint problems and pain.

The joint pain and stiffness associated with this disease can be so bad that people appear bent and stooped over. The name "chikungunya" comes from the language of the Makonde ethnic group. They were living in Tanzania/Mozambique where this virus was first identified and coined the phrase that loosely translates as "that which bends" to describe those who were afflicted.

You get infected with chikungunya if you are bitten by an infected mosquito. You may start showing signs of chikungunya fever anywhere from 1-12 days after getting bit (usually 3-7 days). This is called an "intrinsic incubation period" or the time it takes for the virus to multiply in your body and make you sick.

You can pass along your infection if you are bitten by a mosquito while the virus is circulating in your blood (usually starting a day before you realize you're ill). Once that mosquito is infected, she can spread chikungunya virus when she feeds on another human and continue the infection cycle.

Figure 1. **Extrinsic and intrinsic incubation periods for Chikungunya virus.**



There are no vaccines that can prevent this illness and no specific treatments to make you better any faster. You're probably thinking, "Great, so what *can* we do?"

PREVENTION of mosquito bites is KEY.

- Use mosquito repellents as directed
- Wear long sleeves/pants if possible
- Use screens on windows/doors or use your air conditioner if you have one
- Tip and toss containers (possible mosquito breeding sites); use pest control measures
- Be aware of disease activity if you are travelling– check out this CDC site before you go (wwwnc.cdc.gov/travel/)

St. Lucie County Influenza Summary

- Our county's flu activity is currently "mild" and has been throughout the majority of this year's flu season. We have had no pediatric deaths due to influenza and no lab confirmed influenza outbreaks to date this flu season.
- Pregnant women are still at risk for serious complications of influenza including miscarriage and death, so if you haven't gotten your flu shot, it's still not too late!

Trying to find locations that offer vaccines? Try the HealthMap Vaccine Finder
https://flushot.healthmap.org/

MERLIN Registry System*
Year to Date Incidence Comparisons of Selected Diseases for St. Lucie County and Florida
1 Jan 2014– 28 Feb 2014

- Data include confirmed/probable cases in St. Lucie County residents by date reported to the health department, regardless of where infection was acquired
- Counts are accurate at the time of publication but these may change and/or vary from other reports depending on criteria used
- Alterations of case definitions can result in dramatic changes in case counts

	St. Lucie County		State of Florida	
	1Jan-28 Feb 2014	1Jan-28 Feb 2013	1Jan-28 Feb 2014	1Jan-28 Feb 2013
Central Nervous System & Invasive Diseases				
ENCEPHALITIS, OTHER (NON- ARBOVIRAL)	0	0	0	1
HAEMOPHILUS INFLUENZAE (INVASIVE DISEASE)	2	0	63	52
MENINGITIS (BACTERIAL, CRYPTOCOCCAL, MYCOTIC)	0	0	21	24
MENINGOCOCCAL DISEASE	0	0	11	19
STREP PNEUMONIAE, INVASIVE DISEASE, RESISTANT	3	1	124	125
STREP PNEUMONIAE, INVASIVE DISEASE, SUSCEPT	1	0	147	177
STREPTOCOCCAL DISEASE, INVASIVE GROUP A	3	2	79	39
Hepatitides				
HEPATITIS A	0	0	15	10
HEPATITIS B ACUTE	0	3	58	54
HEPATITIS B, CHRONIC	9	6	686	733
HEPATITIS B (+HBsAg IN PREGNANT WOMEN)	2	3	77	72
HEPATITIS C, ACUTE	2	4	23	34
HEPATITIS C, CHRONIC	54	42	4271	3908
Enteric Diseases				
CAMPYLOBACTERIOSIS	5	2	433	321
CRYPTOSPORIDIOSIS	0	4	82	46
CYCLOSPORIASIS	0	0	1	1
ESCHERICHIA COLI, SHIGA TOXIN PRODUCING	0	1	73	60
GIARDIASIS	3	2	147	166
HEMOLYTIC UREMIC SYNDROME	0	0	2	0
SALMONELLOSIS	10	12	618	534
SHIGELLOSIS	1	1	251	62
VIBRIO ALGINOLYTICUS	0	0	4	1
VIBRIO CHOLERAE (TYPE O1)	0	0	1	0
VIBRIO FLUVIALIS	0	0	0	2
VIBRIO PARAHAEMOLYTICUS	0	0	0	3
VIBRIO VULNIFICUS	0	0	0	0
Vaccine Preventable Diseases				
INFLUENZA A (NOVEL OR PANDEMIC STRAINS)	0	0	0	0
INFLUENZA A (PEDIATRIC MORTALITY)	0	0	3	5
MEASLES	0	0	0	4
MUMPS	0	0	3	0
PERTUSSIS	1	1	129	62
VARICELLA	0	5	95	113
Vector Borne & Zoonotic Diseases				
ANIMAL BITE (PEP FOR RABIES)	16	24	406	363
BRUCELLA	0	0	2	1
DENGUE FEVER	0	0	23	33
LYME DISEASE	1	2	15	14
MALARIA	0	0	7	14
RABID ANIMALS	0	0	18	19
ROCKY MOUNTAIN SPOTTED FEVER	0	0	3	2
WEST NILE VIRUS (NEUROINVASIVE)	0	0	0	0
WEST NILE VIRUS (NON- NEUROINVASIVE)	0	0	0	0
Others				
ARSENIC	0	0	0	4
CARBON MONOXIDE POISONING	1	1	35	9
CIGUATERA	0	0	5	0
LEAD POISONING	1	3	160	116
LEGIONELLA	1	0	36	33
LISTERIOSIS	0	1	6	7
MERCURY POISONING	0	0	3	0
PESTICIDE-RELATED ILLNESS/INJURY	0	9	4	13
SAXITOXIN POISONING (PARALYTIC SHELLFISH POISON)	0	0	0	0

*Data in MERLIN reports are provisional, based on cases entered by county health departments and are not considered official data